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APPLICANTS Joseph Allen Knight, Palm Harbor, FL;					
** CONTINUING DATA ***** This application is a 371 of PCT/US04/21046 06/28/2004 which claims benefit of 60/483,035 06/27/2003					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 08/18/2006					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input checked="" type="checkbox"/> Allowance Examiner's Signature _____ Initials _____		STATE OR COUNTRY FL	SHEETS DRAWING 5	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 1
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TITLE Vascular prosthesis					
FILING FEE RECEIVED 765	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		